PATENT APPLICATION FEE DETERMINATION RECORD— Effective October 1, 2003

Application or Docket Number

CLAIMS AS FILED - PART I								SMALL ENTITY TYPE OF			OTHER THAN								
T	OTAL CLAIMS	•	(Column 1)		(Column 2)							ENTITY							
TOTAL CLAIMS			71					ATE	FEE]	RATE	FEE							
FOR			NUMBER FILED		NUMBER EXTRA		ВА	SIC FEE	385.00	OR	BASIC FEE	770.00							
το	TAL CHARGE	ABLE CLAIMS	子(minus 20=		• 51		×	\$ 9=		OR	X\$18=	918							
IN	DEPENDENT C	LAIMS	5 minus 3 =		7		×	43=		OR	X86=	17-1							
MULTIPLE DEPENDENT CLAIM PRESENT					,		+	145=		OR	+290=	0							
* If the difference in column 1 is less than zero,					o, enter "0" in column 2			DTAL		OR	TOTAL	1860							
	CLAIMS AS AMENDED - PART II									•	OTHER								
		(Column 1)				(Column 3)	SI	ALL I	ENTITY	OR	SMALL	ENTITY							
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID I	BER OUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE							
	Total	*	Minus	**		=	×	\$ 9=		OR	X\$18=								
	Independent	*	Minus	***	CI 4144	<u> </u>	×	43=		OR	X86=								
L	FIRST PRESE	NTATION OF MI	JUITPLE DE	PENDENT	CLAIM		+1	45=		OR	+290=								
								TOTAL		OR	TOTAL	·							
		(Column 1)		(Colun	nn 2)	(Column 3)	AUU	T. FEE	l.,,,		ADDIT. FEE								
	· · · · · · · · · · · · · · · · · · ·	CLAIMS	T .	HIGH	EST				ADDI-			ADDI-							
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVIO PAID	USLY	PRESENT EXTRA	R	ATE	TIONAL FEE		RATE	TIONAL FEE							
	Total	*	Minus	**		=	×	\$ 9=		OR	X\$18=								
	Independent	*	Minus	***		=	×	43=	- <u></u>	OR	X86=								
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								, , , , , , , , , , , , , , , , , , , ,										
								45=		OR	+290=								
								TOTAL T. FEE		OR	TOTAL ADDIT. FEE								
	. ·	(Column 1)		(Colun		(Column 3)			• • •			•							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER USLY	PRESENT EXTRA	R/	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE							
	Total	*	Minus	**		=	X	9=		OR	X\$18=								
ME	Independent	*	Minus	***		=	X4	13=		OR	X86≈								
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											·							
		L	45=		OR	+290=													
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE										OR',	TOTAL								
	i ale myllesi ivul	ilber i reviously i a	10 COL 114 1111	S SPACE IS	loss that	20, order #2 "	/ ADDII	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."; ADDIT. FEE											